

RCE  
IPW

**REQUEST FOR CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

*I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 24, 2005.*

*Renne M.F. Wyzykowski*  
Renne M.F. Wyzykowski

Application Number : 09/833,969 Confirmation No. 3844  
Filing Date : April 11, 2001  
Inventor(s) : Michael L. Obradovich  
Title : GPS PUBLICATION APPLICATION SERVER  
Group Art Unit : 2682  
Examiner Name : Lee Nguyen  
Docket No. : 42254/DMC/C685 Date: October 24, 2005

**MAIL TO: Mail Stop RCE**

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

This application is **not** an application of the kind specified in 37 CFR § 1.114(e).

**1. THE STATUS OF THE APPLICATION IS AS FOLLOWS:**

- a. ☒ Pending (no review proceedings active)
- (1) ☒ An Action was mailed by the Office on June 23, 2005, as to which no appeal under 37 CFR § 1.191 has been filed and
- \_\_\_\_\_ a response under 37 CFR § 1.116 was mailed on
- \_\_\_\_\_ via Express Mail
- \_\_\_\_\_ with certificate of mailing under 37 CFR § 1.8
- ☒ that Action was a Final Rejection, the finality of which is to be withdrawn by this Request
- \_\_\_\_\_ an appeal or civil action under 35 U.S.C. 141,145 or 146 has been terminated
- (2) \_\_\_\_\_ Allowed: the Notice of Allowance was mailed by the Office on
- \_\_\_\_\_ the Issue Fee has not been paid
- \_\_\_\_\_ the Issue Fee has been paid **and** a petition under 37 CFR § 1.313 was granted on
- b. \_\_\_\_\_ Pending (with review proceeding active)
- An appeal under 37 CFR § 1.191 has been filed. **Applicant(s) hereby withdraw that appeal and request reopening of the prosecution of the application.**

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**2. SUBMISSION(S) REQUIRED (check at least one)**

**a. Previously submitted**

- ☐ Consider the amendments/reply under 37 CFR § 1.116 previously filed on  
☐ Consider the arguments in the Appeal or Reply Brief previously filed on  
☐ Other:

**b. Enclosed**

- ☒ Amendment/Reply  
☐ Affidavit(s)/Declaration(s)  
☒ Information Disclosure Statement  
☐ Documents under 37 CFR § 1.48  
☒ Petition for Extension of Time  
☐ Other:

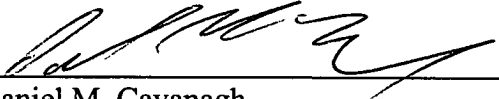
The Examiner is requested to telephone the undersigned promptly following receipt and initial review of the application in light of the Submissions(s) for the conduct of, or the scheduling of, a telephone interview in the application.

Please direct all correspondence to **CUSTOMER NUMBER 23363**. Direct telephone calls to 626/795-9900, **CHRISTIE, PARKER & HALE, LLP, P.O. Box 7068, Pasadena, CA 91109-7068**.

Respectfully submitted,

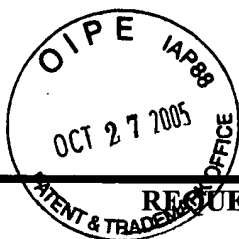
CHRISTIE, PARKER & HALE, LLP

By

  
\_\_\_\_\_

Daniel M. Cavanagh  
Reg. No. 41,661  
626/795-9900

DMC/rmw



**REQUEST FOR CONTINUED EXAMINATION (RCE)  
FEE CALCULATION SHEET**

**Application No. 09/833,969**

| <b>PART I — BASIC FEE</b> |                          |                          |          |
|---------------------------|--------------------------|--------------------------|----------|
| BASIC FEE                 | Small Entity<br>\$395.00 | Large Entity<br>\$790.00 | \$395.00 |

| <b>PART II — ADDITIONAL CLAIMS (compared to application before RCE)</b>   |   |   |                           |                      |                      |              |
|---|---|---|---------------------------|----------------------|----------------------|--------------|
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid For | Number<br>Extra<br>Claims | Small<br>Entity Rate | Large<br>Entity Rate | FEE          |
| Total<br>Claims   | 23  | *28   | 0                         | 0 x \$25.00          | x \$50.00            | -0-          |
| Independent<br>Claims   | 3   | **5   | 0                         | 0 x<br>\$100.00      | x \$200.00           | -0-          |
| First Presentation of Multiple Dependent Claim  |   |   |                           | \$180.00             | \$360.00             | -0-          |
| <b>TOTAL CLAIMS FEE</b>   |   |   |                           |                      |                      | <b>\$-0-</b> |
| List Independent Claims: 3, 5, 18   |   |   |                           |                      |                      |              |
| <p>* IF THE "HIGHEST NUMBER OF TOTAL CLAIMS PREVIOUSLY PAID FOR" IS LESS THAN 20, WRITE "20" IN THIS SPACE.</p> <p>** IF THE HIGHEST NUMBER PREVIOUSLY PAID OR IS 3 OR LESS, WRITE "3" IN THIS SPACE.</p> |   |   |                           |                      |                      |              |

1. FEES (The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed.)
  - a. Amount (total from Fee Calculation Sheet)  
A check for \$395.00 is enclosed.
  - b.   X   The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required for this transaction to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. **A duplicate copy hereof is enclosed.**